

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	4/18/00
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>[Signature]</i>	6/13
FORMALTY REVIEW			
RESPONSE FORMALTY REVIEW		69300	

INDEX OF CLAIMS

✓ Rejected N Non-elected
 Allowed I Interference
 (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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